

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**EASTERN DISTRICT OF MISSOURI**

Case number (if known): \_\_\_\_\_ Chapter you are filing under:

- ☐ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☒ Chapter 13

☐ Check if this is an amended filing

Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<b>1. Your full name</b>  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	<b>Sandra</b> First Name <b>Jean</b> Middle Name <b>King</b> Last Name  Suffix (Sr., Jr., II, III)	 First Name  Middle Name  Last Name  Suffix (Sr., Jr., II, III)
<b>2. All other names you have used in the last 8 years</b>  Include your married or maiden names.	<b>Sandy</b> First Name <b>J.</b> Middle Name <b>King</b> Last Name	 First Name  Middle Name  Last Name
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	<b>xxx - xx - 9 7 6 1</b> OR <b>9xx - xx -</b>	<b>xxx - xx -</b> OR <b>9xx - xx -</b>

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**About Debtor 1:**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and doing business as names

☒ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

**About Debtor 2 (Spouse Only in a Joint Case):**

☐ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

**5. Where you live**

**2630 Glenoak Drive**

Number Street

**Maryland Heights MO 63043**

City State ZIP Code

**St. Louis**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

City State ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

*Check one:*

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

*Check one:* (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7

☐ Chapter 11

☐ Chapter 12

☒ Chapter 13

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

8. How you will pay the fee ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?
- ☐ No
- ☒ Yes.
- |          |                             |      |                   |             |                 |
|----------|-----------------------------|------|-------------------|-------------|-----------------|
| District | <u>EDMO Ch.13 Dismissed</u> | When | <u>05/04/2016</u> | Case number | <u>16-43303</u> |
|          |                             |      | MM / DD / YYYY    |             |                 |
| District | <u>EDMO Ch.13 Dismissed</u> | When | <u>05/24/2013</u> | Case number | <u>13-44897</u> |
|          |                             |      | MM / DD / YYYY    |             |                 |
| District | _____                       | When | _____             | Case number | _____           |
|          |                             |      | MM / DD / YYYY    |             |                 |

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?
- ☒ No
- ☐ Yes.
- |          |       |                     |          |
|----------|-------|---------------------|----------|
| Debtor   | _____ | Relationship to you | _____    |
| District | _____ | When                | _____    |
|          |       | MM / DD / YYYY      | if known |
| Debtor   | _____ | Relationship to you | _____    |
| District | _____ | When                | _____    |
|          |       | MM / DD / YYYY      | if known |

11. Do you rent your residence?
- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

12. Are you a sole proprietor of any full- or part-time business?

- ☒ No. Go to Part 4.  
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

*Check the appropriate box to describe your business:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- ☒ No. I am not filing under Chapter 11.  
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.  
☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

- ☒ No  
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property?

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

**16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☐ No. Go to line 16b.  
☒ Yes. Go to line 17.

**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.  
☐ Yes. Go to line 17.

**16c.** State the type of debts you owe that are not consumer or business debts.

**17. Are you filing under Chapter 7?**

☒ No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No  
☐ Yes

**18. How many creditors do you estimate that you owe?**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**19. How much do you estimate your assets to be worth?**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**20. How much do you estimate your liabilities to be?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000                  | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input checked="" type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000           | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million         | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Sandra Jean King** \_\_\_\_\_  
Sandra Jean King, Debtor 1

Executed on 01/11/2022  
MM / DD / YYYY

**X** \_\_\_\_\_  
Signature of Debtor 2

Executed on \_\_\_\_\_  
MM / DD / YYYY

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X /s/ Randall T. Oettle** Date **01/11/2022**  
Signature of Attorney for Debtor MM / DD / YYYY

**Randall T. Oettle**

Printed name

**R.O.C. Law, Randall Oettle Company, P.C.**

Firm Name

**12964 Tesson Ferry, Suite B**

Number Street

**St. Louis**

City

**MO**

State

**63128**

ZIP Code

Contact phone **(314) 843-0220**

Email address \_\_\_\_\_

**46820**

Bar number

State



**Fill in this information to identify your case and this filing:**

Debtor 1 **Sandra** **Jean** **King**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MISSOURI**

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1.

**2630 Glenoak Drive**

Street address, if available, or other description

**Maryland Heights MO 63043**  
City State ZIP Code

**St. Louis**  
County

**Principle Residence**  
**2630 Glenoak Drive**  
**Maryland Heights, MO 63043**

**Bought 2005 @ \$142K**

**What is the property?**

Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?**

Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<b>\$170,000.00</b>	<b>\$170,000.00</b>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Conventional Real Estate**

☐ Check if this is community property (see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....**

**\$170,000.00**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1.		<b>Who has an interest in the property?</b>	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<b>Toyota</b>	Check one.		
Model:	<b>Rav4</b>	<input checked="" type="checkbox"/> Debtor 1 only	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
Year:	<b>2018</b>	<input type="checkbox"/> Debtor 2 only		
Approximate mileage:	<b>60,000</b>	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<b>\$24,649.00</b>	<b>\$24,649.00</b>
Other information:		<input type="checkbox"/> At least one of the debtors and another		
<b>2018 Toyota Rav4 (approx. 60,000 miles)</b>		<input type="checkbox"/> Check if this is community property (see instructions)		

### 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No  
☐ Yes

### 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

**\$24,649.00**

## Part 3: Describe Your Personal and Household Items

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

### 6. Household goods and furnishings

*Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

**Three bedroom, one and a half bathroom, finished basement residence.**

**\$1,000.00**

**Debtor describes her household goods and furnishings as average quantity and average quality.**

### 7. Electronics

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

**Two televisions, one desk top computer, one tablet, and one cellular device.**

**\$275.00**

### 8. Collectibles of value

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe..... Scroll saw and supplies. \$75.00

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe..... \_\_\_\_\_

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe..... Debtor describes her wearing apparel as average quantity and average quality. \$100.00

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... Costume jewelry. \$25.00

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe..... Two dogs. \$20.00

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information..... \_\_\_\_\_

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**

**\$1,495.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes..... Cash: ..... \$100.00

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No  
☒ Yes..... Institution name:

17.1. Checking account: **Commerce Bank - Checking Account ending in 6548.**

**These funds are composed of ONLY Social Security Benefits. \$6,000.00**

17.2. Savings account: **Commerce Bank - Checking Account ending in 9402 \$750.00**

17.3. Other financial account: **Commerce Bank - Savings Account \$1,250.00**

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No  
☐ Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☒ No  
☐ Yes. Give specific information about them..... Name of entity: % of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them..... Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No  
☐ Yes. List each account separately. Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No  
☐ Yes..... Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No  
☐ Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific  
information about them

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific  
information about them

**Money or property owed to you?**

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**28. Tax refunds owed to you**

☐ No

☒ Yes. Give specific information  
about them, including whether  
you already filed the returns  
and the tax years.....

**Federal: Debtor filed 2020 taxes and received \$1,077.00  
from federal and \$1,199.00 from state. Amt: \$0.00**

Federal: \$0.00

State: \$0.00

Local: \$0.00

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information

Alimony: \_\_\_\_\_  
Maintenance: \_\_\_\_\_  
Support: \_\_\_\_\_  
Divorce settlement: \_\_\_\_\_  
Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance  
company of each policy  
and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples: Accidents, employment disputes, insurance claims, or rights to sue*

☒ No

☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☐ No

☒ Yes. Describe each claim.....

Debtor believes that she has a Workman's Comp claim against her former employer, Wal-Mart for a slip and fall she suffered approximately one (1) year ago. Debtor states that she has been in communication with attorney by the name of Scott Kolker. As of the date of filing, the Debtor has an appointment to see a doctor on February 28, 2022. There has been no mention of a settlement or possible settlement.

Debtor also believes that she could have a possible property damage claim against another motorist who hydroplaned into her during a thunderstorm in May of 2021.

Other than the above, Debtor is unaware of any civil claim for personal injury, worker compensation, property damage, exposure, legal, medical or financial malpractice/malfeasance, class action claim, employment or discrimination claim, or any other potential right to recover monetary sum from a second or third party. Debtor retains the right to assert any such claim and amend her/his Schedule B, accordingly, in the event such claim is discovered or disclosed to Debtor.

**Unknown**

**35. Any financial assets you did not already list**

☒ No

☐ Yes. Give specific information

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**



**\$8,100.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**38. Accounts receivable or commissions you already earned**

☒ No

☐ Yes. Describe..

**39. Office equipment, furnishings, and supplies**

*Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices*

☒ No

☐ Yes. Describe..

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

☒ No  
☐ Yes. Describe.. \_\_\_\_\_

**41. Inventory**

☒ No  
☐ Yes. Describe.. \_\_\_\_\_

**42. Interests in partnerships or joint ventures**

☒ No  
☐ Yes. Describe..... Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**

☒ No  
☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe.... \_\_\_\_\_

**44. Any business-related property you did not already list**

☒ No  
☐ Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....** → **\$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
**If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

☒ No  
☐ Yes.... \_\_\_\_\_

**48. Crops--either growing or harvested**

☒ No  
☐ Yes. Give specific information..... \_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

☒ No  
☐ Yes.... \_\_\_\_\_

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**

☒ No

☐ Yes....

**51. Any farm- and commercial fishing-related property you did not already list**

☒ No

☐ Yes. Give specific  
information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....** →

**\$0.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples: Season tickets, country club membership*

☐ No

☒ Yes. Give specific information.

Push mower, weed eater and a small variety of hand tools.

\$275.00

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....** →

**\$275.00**

**Part 8: List the Totals of Each Part of this Form**

**55. Part 1: Total real estate, line 2.....** → **\$170,000.00**

**56. Part 2: Total vehicles, line 5** \$24,649.00

**57. Part 3: Total personal and household items, line 15** \$1,495.00

**58. Part 4: Total financial assets, line 36** \$8,100.00

**59. Part 5: Total business-related property, line 45** \$0.00

**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00

**61. Part 7: Total other property not listed, line 54** \$275.00

+

**62. Total personal property. Add lines 56 through 61.....** \$34,519.00 Copy personal property total → **+** \$34,519.00

**63. Total of all property on Schedule A/B. Add line 55 + line 62.....** \$204,519.00



**Fill in this information to identify your case:**

Debtor 1	<b>Sandra</b>	<b>Jean</b>	<b>King</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>EASTERN DISTRICT OF MISSOURI</b>		
Case number (if known)			

☐ Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

**04/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: <b>Principle Residence</b> <b>2630 Glenoak Drive</b> <b>Maryland Heights, MO 63043</b>	<u>\$170,000.00</u>	<input checked="" type="checkbox"/> \$15,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.475
<b>Bought 2005 @ \$142K</b> Line from <i>Schedule A/B</i> : <u>1.1</u>			
Brief description: <b>2018 Toyota Rav4 (approx. 60,000 miles)</b>	<u>\$24,649.00</u>	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(5)
Line from <i>Schedule A/B</i> : <u>3.1</u>			

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
---	--	--------------------------------------	------------------------------------

Copy the value from  
*Schedule A/B*

Check only one box for  
each exemption

Brief description: <b>Three bedroom, one and a half bathroom, finished basement residence.</b>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
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**Debtor describes her household goods  
and furnishings as average quantity and  
average quality.**

Line from *Schedule A/B*: 6

Brief description: <b>Two televisions, one desk top computer, one tablet, and one cellular device.</b>	<u>\$275.00</u>	<input checked="" type="checkbox"/> <u>\$275.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
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Line from *Schedule A/B*: 7

Brief description: <b>Scroll saw and supplies.</b>	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
---	----------------	---	-------------------------------

Line from *Schedule A/B*: 9

Brief description: <b>Debtor describes her wearing apparel as average quantity and average quality.</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
--	-----------------	--	-------------------------------

Line from *Schedule A/B*: 11

Brief description: <b>Costume jewelry.</b>	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(2)
---	----------------	---	-------------------------------

Line from *Schedule A/B*: 12

Brief description: <b>Two dogs.</b>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)
--	----------------	---	-------------------------------

Line from *Schedule A/B*: 13

Brief description: <b>Cash on person.</b>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)
--	-----------------	--	-------------------------------

Line from *Schedule A/B*: 16

Brief description: <b>Commerce Bank - Checking Account ending in 6548.</b>	<u>\$6,000.00</u>	<input checked="" type="checkbox"/> <u>\$6,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(10)(a)
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**These funds are composed of ONLY Social  
Security Benefits.**

Line from *Schedule A/B*: 17.1

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
---	--	--------------------------------------	------------------------------------

Copy the value from  
*Schedule A/B*

Check only one box for  
each exemption

Brief description:

**Commerce Bank - Checking Account  
ending in 9402**

Line from *Schedule A/B*: 17.2

\$750.00

☒

\$500.00

☐

100% of fair market  
value, up to any  
applicable statutory  
limit

**Mo. Rev. Stat. § 513.430.1(3)**

Brief description:

**Commerce Bank - Savings Account**

Line from *Schedule A/B*: 17.3

\$1,250.00

☒

\$0.00

☐

100% of fair market  
value, up to any  
applicable statutory  
limit

**Mo. Rev. Stat. § 513.430.1(3)**

Brief description:

**Debtor believes that she has a Workman's  
Comp claim against her former employer,  
Wal-Mart for a slip and fall she suffered  
approximately one (1) year ago. Debtor  
states that she has been in  
communication with attorney by the name  
of Scott Kolker. As of the date of filing, the  
Debtor has an appointment to see a doctor  
on February 28, 2022. There has been no  
mention of a settlement or possible  
settlement.**

Unknown

☒

\$0.00

☐

100% of fair market  
value, up to any  
applicable statutory  
limit

**Mo. Rev. Stat. § 287.260**

**Debtor also believes that she could have a  
possible property damage claim against  
another motorist who hydroplaned into her  
during a thunderstorm in May of 2021.**

**Other than the above, Debtor is unaware of  
any civil claim for personal injury, worker  
compensation, property damage,  
exposure, legal, medical or financial  
malpractice/malfeasance, class action  
claim, employment or discrimination  
claim, or any other potential right to  
recover monetary sum from a second or  
third party. Debtor retains the right to  
assert any such claim and amend her/his  
Schedule B, accordingly, in the event such  
claim is discovered or disclosed to Debtor.**

Line from *Schedule A/B*: 34

Brief description:

**Push mower, weed eater and a small  
variety of hand tools.**

Line from *Schedule A/B*: 53

\$275.00

☒

\$275.00

☐

100% of fair market  
value, up to any  
applicable statutory  
limit

**Mo. Rev. Stat. § 513.430.1(1)**

**Fill in this information to identify your case:**

Debtor 1 **Sandra** **Jean** **King**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MISSOURI**

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

*Column A*  
**Amount of claim**  
Do not deduct the value of collateral

*Column B*  
**Value of collateral that supports this claim**

*Column C*  
**Unsecured portion**  
If any

2.1

**MSD**

Creditor's name

**2350 Market Street**

Number Street

**Describe the property that secures the claim:**

**2630 Glenoak Drive, Maryland Heights, MO 63043**

**\$689.56**

**\$170,000.00**

**St. Louis**

**MO**

**63103-2555**

City

State

ZIP Code

**Who owes the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset)

**Sewer**

Date debt was incurred **2013**

Last 4 digits of account number

**9 7 6 1**

Case No.: **12SL-AC43087**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$689.56**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.2	Describe the property that secures the claim:	\$500.00	\$170,000.00	
<b>MSD</b> Creditor's name <b>2350 Market Street</b> Number Street				
St. Louis MO 63103-2555 City State ZIP Code				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred 2021				
Last 4 digits of account number _____				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Sewer Services</b>				

2.3	Describe the property that secures the claim:	\$21,560.00	\$24,649.00	
<b>Santander Consumer</b> Creditor's name <b>P.O. Box 961288</b> Number Street				
Fort Worth TX 76161 City State ZIP Code				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred 2021				
Last 4 digits of account number _____				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <b>Automobile</b>				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$22,060.00

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 1:**

**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral

**Column B**  
**Value of collateral that supports this claim**

**Column C**  
**Unsecured portion**  
If any

2.4

**St. Louis County Collector**

Creditor's name

**41 S. Central Ave**

Number Street

Describe the property that secures the claim:

**2630 Glenoak Drive, Maryland Heights, MO 63043**

**\$9,583.74**

**\$170,000.00**

**St. Louis**

**MO 63105**

City

State ZIP Code

**Who owes the debt?** Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

**As of the date you file, the claim is:** Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

**Nature of lien.** Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☒ Other (including a right to offset)

**Real Estate Taxes**

Date debt was incurred **2019-2021**

Last 4 digits of account number **0 2 2 4**

**Real Estate Taxes**

2.5

**US Bank Trust National Association**

Creditor's name

**c/o SN Servicing Corporation**

Number Street

**323 5th Street**

Describe the property that secures the claim:

**2630 Glenoak Drive, Maryland Heights, MO 63043**

**\$27,644.64**

**\$170,000.00**

**Eureka**

**MO 95501-0305**

City

State ZIP Code

**Who owes the debt?** Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

**As of the date you file, the claim is:** Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

**Nature of lien.** Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☒ Other (including a right to offset)

**Mortgage**

Date debt was incurred **2020**

Last 4 digits of account number **8 2 5 2**

**Mortgage matures in the 60 months and will be paid in full.**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$37,228.38**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$59,977.94**

**Fill in this information to identify your case:**

Debtor 1 **Sandra** **Jean** **King**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MISSOURI**

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.  
☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$47.05	\$47.05	\$0.00

**St. Louis County Collector**  
Priority Creditor's Name  
**41 S. Central Ave**  
Number Street

Last 4 digits of account number 5 3 1 3

When was the debt incurred? 2021

As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

**St. Louis** **MO** **63105**  
City State ZIP Code

Who incurred the debt? Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:  
☐ Domestic support obligations  
☒ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Is the claim subject to offset?  
☒ No  
☐ Yes

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**\$728.00**

4.1

**AT&T**

Nonpriority Creditor's Name

**P.O. Box 930170**

Number Street

**Dallas TX, 75393**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **8 3 6 9**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Telephone Service**

4.2

**Barnes Jewish Hospital**

Nonpriority Creditor's Name

**PO Box 954540**

Number Street

**St. Louis MO 63195-4540**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **5 6 9 3**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

**\$631.27**



Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**\$350.00**

4.3

**Baumann Tree Service**

Nonpriority Creditor's Name

**8476 Lake Drive**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Account**

**Cedar Hill**

**MO 63016**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.4

**Columbia House**

Nonpriority Creditor's Name

**P.O. Box 1114**

Number Street

**1400 N. Fruitridge Ave**

Last 4 digits of account number 2 8 3 6

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Account**

**Terre Haute**

**IN 47811**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.5

**DCL Medical Laboratories**

Nonpriority Creditor's Name

**1616 Eastport Plaza Drive**

Number Street

Last 4 digits of account number 1 9 0 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

**Collinsville**

**IL 62234**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

**\$91.00**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**\$164.50**

4.6

**Express Scripts**

Nonpriority Creditor's Name

**1 Express Way**

Number Street

**St Louis**

**MO 63121-1824**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.7

**Mystery Book Club**

Nonpriority Creditor's Name

**PO Box 916400**

Number Street

**Rantoul**

**IL 61866**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

4.8

**Our Urgent Care, LLC**

Nonpriority Creditor's Name

**PO Box 795216**

Number Street

**St. Louis**

**MO 63179**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **9 9 2 6**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

Last 4 digits of account number **1 0 9 3**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Account**

Last 4 digits of account number **4 2 4 7**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

**\$578.00**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**\$57.29**

4.9

**Rehabilitation Institute of St. Louis**

Nonpriority Creditor's Name

**P.O. Box 504083**

Number Street

**St. Louis**

**MO 63150**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **5 8 3 5**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

**\$131.00**

4.10

**Safeco Insurance**

Nonpriority Creditor's Name

**PO Box 461**

Number Street

**St. Louis**

**MO 63166**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **0 9 5 6**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**insurance**

**\$664.87**

4.11

**SSM Medical Group**

Nonpriority Creditor's Name

**P.O. Box 795100**

Number Street

**St. Louis**

**MO 63179**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **6 3 3 7**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**\$30.00**

4.12

**SSM St. Paul's Health Center**

Nonpriority Creditor's Name

**P.O. Box 510410**

Number Street

**St. Louis**

**MO 63151**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **9 7 6 1**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

4.13

**Wash U Clinical Association**

Nonpriority Creditor's Name

**P.O. Box 503954**

Number Street

**St. Louis**

**MO 63150**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4 2 1 1**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

4.14

**Women to Women Healthcare**

Nonpriority Creditor's Name

Number Street

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **2 1 6 9**

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☒ Contingent  
☐ Unliquidated  
☒ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify

**Medical Services**

**\$150.00**

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Account Resolution Cor**

Name

**17600 Chesterfiled Airport**

Number Street

**Chesterfield**

City

**MO**

State

**63005**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -Women to Women Healthcare**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 1 6 9

**American Financial Credit Services Inc**

Name

**9247 N. Meridian St. Ste. 206**

Number Street

**Indianapolis**

City

**IN**

State

**46260-1824**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Consumer Collection Management**

Name

**P.o. box 1839**

Number Street

**Maryland Heights**

City

**MO**

State

**63043**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for - Washington University**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 3 5 2

**Credit Collection Services**

Name

**Two Wells Avenue, Dept. 9134**

Number Street

**Newton**

City

**MA**

State

**02459**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -Safeco Auto Insurance**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0 9 5 6

**Enhanced Recovery Company**

Name

**8014 Bayberry Rd.**

Number Street

**Jacksonville**

City

**FL**

State

**32256**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -ATT**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**IRS**

Name

**P.O. Box 7346**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Federal Income Taxes**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 7 6 1

**Philadelphia**

**PA**

**19101-7346**

City

State

ZIP Code

**Kansas Counselors, Inc.**

Name

**PO Box 14765**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 2 4 7

**Shawnee Mission**

**KS**

**66285**

City

State

ZIP Code

**Medicredit**

Name

**939 N Hwy 67**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Collecting for -Barnes  
Jewish**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Florissant**

**MO**

**63031**

City

State

ZIP Code

**Milsap & Singer, P.C.**

Name

**612 Spirit Drive**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Attorney for Seterus,  
Inc.**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 5 F C

**St. Louis**

**MO**

**63005**

City

State

ZIP Code

**Missouri Department of Revenue**

Name

**Division of Taxation**

Number Street

**P.O. Box 385**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

**Missouri Income Taxes**

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 7 6 1

**Jefferson City**

**MO**

**65105-0385**

City

State

ZIP Code

**Onewest Bank**

Name

**6900 Beatrice drive**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Kalamazoo**

**MI**

**49009**

City

State

ZIP Code

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**RJM Acquisitions**

Name

**575 Underhill Blvd**

Number Street

**Syosset**

City

**NY**

State

**11791**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐

Part 1: Creditors with Priority Unsecured Claims

☐

Part 2: Creditors with Nonpriority Unsecured Claims

**Collecting for -Mystery  
Book Club**

Last 4 digits of account number 1 0 9 3

**SN Servicing Corporation**

Name

**323 5th Street**

Number Street

**Eureka**

City

**CA**

State

**95501**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐

Part 1: Creditors with Priority Unsecured Claims

☐

Part 2: Creditors with Nonpriority Unsecured Claims

**Collecting for US Bank  
Trust National**

Last 4 digits of account number 8 2 5 2

**Tridentasset.com**

Name

**5755 NorthPoint Pkwy Street**

Number Street

**Alpharetta**

City

**GA**

State

**30022**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐

Part 1: Creditors with Priority Unsecured Claims

☐

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**US Attorney's Office**

Name

**111 South 10th Street**

Number Street

**Suite 3300**

**St. Louis**

City

**MO**

State

**63102**

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):

☐

Part 1: Creditors with Priority Unsecured Claims

☐

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 7 6 1

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$47.05</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$47.05</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$4,050.47</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$4,050.47</u>



**Fill in this information to identify your case:**

Debtor 1	<u>Sandra</u>	<u>Jean</u>	<u>King</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF MISSOURI</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

**Fill in this information to identify your case:**

Debtor 1	<b>Sandra</b>	<b>Jean</b>	<b>King</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF MISSOURI</b>			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)  
☒ No  
☐ Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  
☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☐ Yes
3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: **Your codebtor**

Column 2: **The creditor to whom you owe the debt**

Check all schedules that apply:

**Fill in this information to identify your case:**

Debtor 1	<b>Sandra</b>	<b>Jean</b>	<b>King</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>EASTERN DISTRICT OF MISSOURI</b>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
<b>Occupation</b>	<b>Cashier</b>	
<b>Employer's name</b>	<b>Menard, Inc.</b>	
<b>Employer's address</b>	<b>5101 Menard Drive</b>	
	Number Street	Number Street
	<b>Eau Claire</b>	<b>WI 54703</b>
	City	State Zip Code
		City State Zip Code
<b>How long employed there?</b>	<b>9 Months</b>	

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	<b>\$1,300.00</b>	
<b>3. Estimate and list monthly overtime pay.</b>	<b>\$0.00</b>	
<b>4. Calculate gross income.</b> Add line 2 + line 3.	<b>\$1,300.00</b>	

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	<b>\$1,300.00</b>	
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. <b>\$84.24</b>	
5b. Mandatory contributions for retirement plans	5b. <b>\$0.00</b>	
5c. Voluntary contributions for retirement plans	5c. <b>\$0.00</b>	
5d. Required repayments of retirement fund loans	5d. <b>\$0.00</b>	
5e. Insurance	5e. <b>\$0.00</b>	
5f. Domestic support obligations	5f. <b>\$0.00</b>	
5g. Union dues	5g. <b>\$0.00</b>	
5h. Other deductions. Specify: _____	5h. <b>\$0.00</b>	
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <b>\$84.24</b>	
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. <b>\$1,215.76</b>	
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <b>\$0.00</b>	
8b. Interest and dividends	8b. <b>\$0.00</b>	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <b>\$0.00</b>	
8d. Unemployment compensation	8d. <b>\$0.00</b>	
8e. Social Security	8e. <b>\$1,546.50</b>	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <b>\$0.00</b>	
8g. Pension or retirement income	8g. <b>\$0.00</b>	
8h. Other monthly income. Specify: _____	8h. <b>\$0.00</b>	
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <b>\$1,546.50</b>	
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>\$2,762.26</b>	<b>\$2,762.26</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. <b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. <b>\$2,762.26</b>	<b>\$2,762.26</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: <b>Debtor does not consent to paying unsecured, non-priority debts with her Social Security benefits.</b>		<b>Combined monthly income</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Sandra</b>	<b>Jean</b>	<b>King</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>EASTERN DISTRICT OF MISSOURI</b>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

☒ No

☐ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses**

**4. The rental or home ownership expenses for your residence.**  
Include first mortgage payments and any rent for the ground or lot.

4. \_\_\_\_\_

**If not included in line 4:**

4a. Real estate taxes	4a. <b>\$120.00</b>
4b. Property, homeowner's, or renter's insurance	4b. <b>\$150.00</b>
4c. Home maintenance, repair, and upkeep expenses	4c. <b>\$25.00</b>
4d. Homeowner's association or condominium dues	4d. _____

Debtor 1 Sandra Jean King

Case number (if known) \_\_\_\_\_

**Your expenses**

<b>5. Additional mortgage payments for your residence</b> , such as home equity loans	5.	_____
<b>6. Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	<u>\$80.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$60.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$67.00</u>
6d. Other. Specify: <u>Cellular Services</u>	6d.	<u>\$60.00</u>
<b>7. Food and housekeeping supplies</b>	7.	<u>\$225.00</u>
<b>8. Childcare and children's education costs</b>	8.	_____
<b>9. Clothing, laundry, and dry cleaning</b>	9.	<u>\$25.00</u>
<b>10. Personal care products and services</b>	10.	<u>\$25.00</u>
<b>11. Medical and dental expenses</b>	11.	<u>\$100.00</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$125.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<u>\$41.00</u>
<b>14. Charitable contributions and religious donations</b>	14.	_____
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$105.00</u>
15d. Other insurance. Specify: <u>Medicare Medical Insurance</u>	15d.	<u>\$148.50</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Personal Property Taxes</u>	16.	<u>\$20.00</u>
<b>17. Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a.	_____
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: <u>Pet Supplies</u>	17c.	<u>\$50.00</u>
17d. Other. Specify: _____	17d.	_____
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	_____
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	19.	_____

Debtor 1 Sandra Jean King

Case number (if known) \_\_\_\_\_

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: \_\_\_\_\_ 21. **+** \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a. <u>\$1,426.50</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$1,426.50</u>

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <u>\$2,762.26</u>
23b. Copy your monthly expenses from line 22c above.	23b. <u>-\$1,426.50</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <u>\$1,335.76</u>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

**None.**

**Fill in this information to identify your case:**

Debtor 1 **Sandra** **Jean** **King**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MISSOURI**

Case number  
(if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106Sum

**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B..... **\$170,000.00**

1b. Copy line 62, Total personal property, from Schedule A/B..... **\$34,519.00**

1c. Copy line 63, Total of all property on Schedule A/B..... **\$204,519.00**

**Part 2: Summarize Your Liabilities**

**Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$59,977.94**

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$47.05**

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... **+** **\$4,050.47**

**Your total liabilities**

**\$64,075.46**

**Part 3: Summarize Your Income and Expenses**

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... **\$2,762.26**

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... **\$1,426.50**



Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

**\$1,335.04**

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$47.05</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<b>\$47.05</b>

**Fill in this information to identify your case:**

Debtor 1	<u>Sandra</u>	<u>Jean</u>	<u>King</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF MISSOURI</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Sandra Jean King  
Sandra Jean King, Debtor 1

Date 01/11/2022  
MM / DD / YYYY

X \_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<u>Sandra</u>	<u>Jean</u>	<u>King</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF MISSOURI</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

**Official Form 107**

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

**1. What is your current marital status?**

- ☐ Married  
☒ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$370.57</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the last calendar year:</b> (January 1 to December 31, <u>2021</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$10,998.69</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2020</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$13,132.00</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<b>Social Security</b>	<b>\$1,546.50</b>
<b>For the last calendar year:</b> (January 1 to December 31, <u>2021</u> ) YYYY	<b>Social Security</b>	<b>\$18,558.00</b>
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2020</u> ) YYYY	<b>Social Security</b>	<b>\$18,030.00</b>

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

<b>Santander Consumer</b> Creditor's name <b>P.O. Box 961288</b> Number Street  <b>Fort Worth TX 76161</b> City State ZIP Code	<b>Dates of payment</b>  <b>Total amount paid</b> <b>\$963.68</b>	<b>Amount you still owe</b> <b>\$21,560.00</b>	<b>Was this payment for...</b> <input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
<b>Debtor paid regular routine monthly payments in the amount of approximately \$481.84 per month for November and December of 2021.</b>			
<b>Foremost Insurance Company</b> Creditor's name  Number Street  City State ZIP Code	<b>Dates of payment</b>  <b>Total amount paid</b> <b>\$663.00</b>	<b>Amount you still owe</b>  	<b>Was this payment for...</b> <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Homeowners Insurance</u>
<b>Debtor paid regular routine monthly payments in the amount of approximately \$221.00 per month for November and December of 2021.</b>			
<b>Weiss Toyota</b> Creditor's name  Number Street  City State ZIP Code	<b>Dates of payment</b>  <b>Total amount paid</b> <b>\$6,000.00</b>	<b>Amount you still owe</b>  	<b>Was this payment for...</b> <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Automobile Downpayment</u>
<b>Debtor paid \$6,000.00 as a downpayment on the 2018 Toyota Rav4.</b>			

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<b>Missouri Department of Revenue</b>		<b>\$2,028.00</b>	<b>\$0.00</b>	<input type="checkbox"/> Mortgage
Creditor's name				<input type="checkbox"/> Car
<b>Division of Taxation</b>		<b>Debtor paid approximately \$2,028.00 for the</b>		<input type="checkbox"/> Credit card
Number Street		<b>Sales Tax on the 2018 Toyota Rav4.</b>		<input type="checkbox"/> Loan repayment
<b>P.O. Box 385</b>				<input type="checkbox"/> Suppliers or vendors
<b>Jefferson City</b>	<b>MO</b>	<b>65105-0385</b>		<input checked="" type="checkbox"/> Other <b>Automobile Sales Ta</b>
City	State	ZIP Code		

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**  
*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No  
☐ Yes. List all payments to an insider.

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments that benefited an insider.

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**  
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No  
☐ Yes. Fill in the details.

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.  
☐ Yes. Fill in the information below.

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No  
☐ Yes. Fill in the details.

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No  
☐ Yes

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☐ No  
☒ Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Debtor was involved in an automobile accident in May of 2021, when during a thunderstorm, her automobile was struck by another automobile that hydroplaned into her.

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

Debtor turned this loss into her insurance company Geico. Debtor received approximately \$4,000.00 from Geico for this loss.

Date of your loss

May of 2021

Value of property lost

\$4,000.00

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No  
☒ Yes. Fill in the details.

**R.O.C. Law**

Person Who Was Paid

**12964 Tesson Ferry Road**

Number Street

**Suite B**

**St. Louis**

City

**MO**

State

**63128**

ZIP Code

**roettle@roclaw.com**

Email or website address

Description and value of any property transferred

**\$600.00 Attorney Fee**

**\$313.00 Court Filing Fee**

Date payment or transfer was made

08/2021

Amount of payment

\$913.00

Person Who Made the Payment, if Not You

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No  
☒ Yes. Fill in the details.

Person Who Received Transfer	Description and value of any property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
<u>Weiss Toyota</u> 11771 Tesson Ferry Road Number Street	Debtor traded in a 2005 Ford Taurus to Weiss Toyota in November of 2021.	Debtor recieved a trade in value of \$500.00. These funds were applied directly towards the downpayment on the 2018 Toyota Rav4.	<u>vember of 20</u>
St. Louis City	MO State	63128 ZIP Code	
Person's relationship to you <u>None</u>			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No  
☐ Yes. Fill in the details.

## Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.



Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
- ☐ Yes. Fill in the details below.

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Sandra Jean King  
Sandra Jean King, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 01/11/2022

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
- ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MISSOURI  
ST. LOUIS DIVISION**

In re **Sandra Jean King**

Case No. \_\_\_\_\_

Chapter **13** \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u><b>\$4,800.00</b></u>
Prior to the filing of this statement I have received.....	<u><b>\$600.00</b></u>
Balance Due.....	<u><b>\$4,200.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**01/11/2022**

*Date*

**/s/ Randall T. Oettle**

*Randall T. Oettle*

R.O.C. Law, Randall Oettle Company, P.C.

12964 Tesson Ferry, Suite B

St. Louis, MO 63128

Phone: (314) 843-0220 / Fax: (314) 843-0048

Bar No. 46820

**/s/ Sandra Jean King**

*Sandra Jean King*

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MISSOURI  
ST. LOUIS DIVISION**

IN RE: **Sandra Jean King**

CASE NO

CHAPTER **13**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 1/11/2022

Signature /s/ Sandra Jean King  
Sandra Jean King

Date \_\_\_\_\_

Signature \_\_\_\_\_

Account Resolution Cor  
17600 Chesterfield Airport  
Chesterfield, MO 63005

American Financial Credit Services Inc  
9247 N. Meridian St. Ste. 206  
Indianapolis, IN 46260-1824

AT&T  
P.O. Box 930170  
Dallas TX, 75393

Barnes Jewish Hospital  
PO Box 954540  
St. Louis, MO 63195-4540

Baumann Tree Service  
8476 Lake Drive  
Cedar Hill, MO 63016

Columbia House  
P.O. Box 1114  
1400 N. Fruitridge Ave  
Terre Haute, IN 47811

Consumer Collection Management  
P.o. box 1839  
Maryland Heights, MO 63043

Credit Collection Services  
Two Wells Avenue, Dept. 9134  
Newton, MA 02459

DCL Medical Laboratories  
1616 Eastport Plaza Drive  
Collinsville, IL 62234

Enhanced Recovery Company  
8014 Bayberry Rd.  
Jacksonville, FL 32256

Express Scripts  
1 Express Way  
St Louis, MO 63121-1824

IRS  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Kansas Counselors, Inc.  
PO Box 14765  
Shawnee Mission, KS 66285

Medicredit  
939 N Hwy 67  
Florissant, MO 63031

Milsap & Singer, P.C.  
612 Spirit Drive  
St. Louis, MO 63005

Missouri Department of Revenue  
Division of Taxation  
P.O. Box 385  
Jefferson City, MO 65105-0385

MSD  
2350 Market Street  
St. Louis, MO 63103-2555

Mystery Book Club  
PO Box 916400  
Rantoul, IL 61866

Onewest Bank  
6900 Beatrice drive  
Kalamazoo, MI 49009

Our Urgent Care, LLC  
PO Box 795216  
St. Louis, MO 63179

Rehabilitation Institute of St. Louis  
P.O. Box 504083  
St. Louis, MO 63150

RJM Acquisitions  
575 Underhill Blvd  
Syosset, NY 11791

Safeco Insurance  
PO Box 461  
St. Louis, MO 63166

Santander Consumer  
P.O. Box 961288  
Fort Worth, TX 76161

SN Servicing Corporation  
323 5th Street  
Eureka, CA 95501

SSM Medical Group  
P.O. Box 795100  
St. Louis, MO 63179

SSM St. Paul's Health Center  
P.O. Box 510410  
St. Louis, MO 63151



St. Louis County Collector  
41 S. Central Ave  
St. Louis, MO 63105

Tridentasset.com  
5755 NorthPoint Pkwy Street  
Alpharetta, GA 30022

US Attorney's Office  
111 South 10th Street  
Suite 3300  
St. Louis, MO 63102

US Bank Trust National Association as Tr  
c/o SN Servicing Corporation  
323 5th Street  
Eureka, MO 95501-0305

Wash U Clinical Association  
P.O. Box 503954  
St. Louis, MO 63150

Women to Women Healthcare

**Fill in this information to identify your case:**

Debtor 1 **Sandra** **Jean** **King**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MISSOURI**

Case number  
(if known) \_\_\_\_\_

**Check as directed in lines 17 and 21:**

According to the calculations required by this Statement:

- ☒ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☐ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☒ 3. The commitment period is 3 years.
- ☐ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

**Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

**Part 1: Calculate Your Average Monthly Income**

1. **What is your marital and filing status?** Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married.** Fill out both Columns A and B, lines 2-11.

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. <b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	<b>\$1,335.04</b>	
3. <b>Alimony and maintenance payments.</b> Do not include payments from a spouse.	<b>\$0.00</b>	
4. <b>All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	<b>\$0.00</b>	
5. <b>Net income from operating a business, profession, or farm</b>		
	Debtor 1	Debtor 2
Gross receipts (before all deductions)	<b>\$0.00</b>	
Ordinary and necessary operating expenses	<b>\$0.00</b>	
Net monthly income from a business, profession, or farm	<b>\$0.00</b>	
	Copy here → <b>\$0.00</b>	

Debtor 1 **Sandra Jean King**

Case number (if known) \_\_\_\_\_

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**6. Net income from rental and other real property**

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	<u>\$0.00</u>	_____		
Ordinary and necessary operating expenses	- <u>\$0.00</u>	- _____		
Net monthly income from rental or other real property	<u>\$0.00</u>	_____	Copy here →	<u>\$0.00</u>

**7. Interest, dividends, and royalties**

\$0.00

**8. Unemployment compensation**

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: .....↓

For you..... \$0.00

For your spouse..... \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$0.00

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_  
\_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total average monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

<b>\$1,335.04</b>	+	_____	=	<b>\$1,335.04</b>
-------------------	---	-------	---	-------------------

Total average  
monthly income

**Part 2: Determine How to Measure Your Deductions from Income**

**12. Copy your total average monthly income from line 11.** ..... \$1,335.04

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**13. Calculate the marital adjustment.** Check one:

- ☒ You are not married. Fill in 0 below.  
☐ You are married and your spouse is filing with you. Fill in 0 below.  
☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

_____	_____	
_____	_____	
_____	+	_____
Total.....		<div style="border: 1px solid black; padding: 2px;">\$0.00</div> Copy here → — <div style="border: 1px solid black; padding: 2px;">\$0.00</div>

**14. Your current monthly income.** Subtract the total in line 13 from line 12.

\$1,335.04

**15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here → ..... 

\$1,335.04

Multiply line 15a by 12 (the number of months in a year). X 12

15b. The result is your current monthly income for the year for this part of the form. .... 

\$16,020.48

**16. Calculate the median family income that applies to you.** Follow these steps:

16a. Fill in the state in which you live. Missouri

16b. Fill in the number of people in your household. 1

16c. Fill in the median family income for your state and size of household..... 

\$51,144.00

  
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**17. How do the lines compare?**

- 17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).  
17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**

**18. Copy your total average monthly income from line 11.** ..... 

\$1,335.04

**19. Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. .... — 

\$0.00

19b. Subtract line 19a from line 18. 

\$1,335.04

Debtor 1 Sandra Jean King Case number (if known) \_\_\_\_\_

**20. Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b ..... **\$1,335.04**  
Multiply by 12 (the number of months in a year). **X 12**  
20b. The result is your current monthly income for the year for this part of the form. **\$16,020.48**  
20c. Copy the median family income for your state and size of household from line 16c. .... **\$51,144.00**

**21. How do the lines compare?**

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Sandra Jean King** \_\_\_\_\_  
Sandra Jean King, Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 1/11/2022  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.